

**ABDOMINAL PAIN: NONTRAUMATIC**

**ACTION/TREATMENT:**

- ABCs/monitor cardiac rhythm.
- IV access titrated to perfusion as needed.
- Morphine sulfate: 2-20 mg IVP titrated to pain.

**Notes:**

- Patients assessed as having abdominal aortic aneurysm (AAA) disruption should be triaged to a hospital capable of immediate vascular surgery, or to a trauma center.
- Signs of AAA disruption include:
  - Sudden onset abdominal, back or flank pain
  - Shock (hypotension, poor skin signs)
  - Bradycardia or tachycardia
  - Pulsating mass, loss of distal pulses are not always observed
- Patients considered at risk of AAA disruption include:
  - Male
  - age > 50 years
  - History of hypertension
  - Known AAA
  - Family history of AAA
  - Coronary artery disease or other vascular disease

Shaded text indicates BH order

Unshaded text indicates standing order